Amended 1/23/12

	POLITICAL COMMITTEE		FOR OF	FICE USE ONLY
	CITY/TOWN OF LHC			
	CAMPAIGN FINANCE REPORT		回属	CEINED
,	2012 August/November Regular Election	r		
1.	ommittee to Elect Latura Call	ette		UL 2 3 2012
F	ull Name of Committee	:		
·	LHC AZ86404 MOL	rane	C	ITY CLERK
	City ZIP Code County Phone		3A. ID#	
2	ponsoring Organization or Candidate and office			10.100
<u></u>	lame of Candidate and Office Sought (if applicable)		12-	NP-102
	-Mail Address Fax #	·		
	-main rudieso ( De m			
4.	REPORTING PERIOD (Please check appropriate box)			DUE BETWEEN
	January 31 Report - For Period of thru December 31, 2011		Jaı	nuary 1, 2012 and January 31, 2012
X	June 30 Report - For Period of January 1, 2012 thru May 31, 2012			June 1, 2012 and June 30, 2012
	Pre-Primary Election Report - For Period of June 1, 2012 thru August 16, 2012	• • • • • • • • • • • • • • • • • • • •	Aı	ugust 17, 2012 and August 24, 2012
	Post-Primary Election Report - For Period of August 17, 2012 thru September 17,	2012	Septembe	r 18, 2012 thru September 27, 2012
	Pre-General Election Report - For Period of September 18, 2012 thru October 25,	2012	Octol	per 26, 2012 and November 2, 2012
	Post-General Election Report - For Period of October 26, 2012 thru November 26	, 2012	Noveml	ber 27, 2012 and December 6, 2012
	**January 31, Report - For Period of November 27, 2012 thru December 31, 2013		Ja	nuary 1, 2014 and January 31, 2014
5.	SUMMARY	_	olumn A	Column B
		ı	his Reporting Period	Election Period Total To Date
5a	Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)			
5b	Cash on Hand at the Beginning of this Reporting Period	96	30.00	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	4	87.76	
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	140	7.76	1407.76
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]			0
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	3	50.01	
7.	Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	10.	50.01 57.75	

<sup>\*</sup>Insert date which is 21 days after date of last election (A.R.S. §16-913).

\*\*Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

Page 2

3. Report covering period from 1-1-12 Thru 5-31-12		-NP-10Z
RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
Contributions other than loans and in-kind:		,
(a) Individuals - more than \$25 (Total from Schedule A)	487.76	1407.76
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		·
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]		·
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).		
DISBURSEMENTS		
Expenditures for operating expenses (Total from Schedule D)	·	
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		·
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)	·	
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]		
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to complete.	the best of my knowledge	and belief it is true and
Type or Print Name of Treasurer		

# CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

SCHEDULE  ${\bf A}$ 

	1. Committee to Elect La Juana	a Giletto	2. ID# /2-1	OP-102
		5-31-		
4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
4a.	LAST Leach Howard STREET ADDRESS 2 FIRST MI	1-25-12	100.00	100.00
	OCCUPATION TO TO THE STATE SIP			
b.	Majorey FRED  STREET ADDRESS  MI  FIRST  MI  FIRST  MI  THE PART   MI  THE PART	2-6-13	\$100.00	\$100.00
	OCCUPATION Rotined EMPLOYER			
c.	Klostermeier Diane	2-7-12	1500	\$50.00
	OCCUPATION EMPLOYER  CITY  LAC  STATE  AZ  SCHOOL  EMPLOYER  EMPLOYER			·
d.	STREET ADDRESS FIRST MI	4-17-12	\$ 200.00	300,00
	CITY LHC AZ 86406  OCCUPATION EMPLOYER  EMPLOYER			
e.	STREET ADDRESS. FIRST Chard  MI STREET ADDRESS.	1-25-12	437.76	37,76
	occupation Retired EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		487.76	487.76

# CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL\*

SCHEDULE A-1

1. Committee Name	te to Elect	Latrava	12-NP-102
3. Report covering period from	1-1-12	thru5'-3	3/-12

## 4. Aggregate Total of Contributions of \$25 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	0	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]

<sup>\*</sup>If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE **B** 

1. Committee Name	inter to Hect Last	nua G	rillett <sub>e</sub>	2. ID# 12-NP-10Z
3. Report covering period from _	1-1-12	thru	5-3,	1-12

4		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	IDE	NTITY OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4a	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
C.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		·
·	DATE RECEIVED			
d.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	·		
g.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED		·	
h.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	-		
5.	ENTER TOTAL ONLY IF L Detailed Summary Page, L	AST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to ine 4(c), Column A]	4	6

	CANDIDATE LOANS		SCHEDULE C		
1.	Committee Name Committee to Elect Latura	Gillette	2. ID# /2-/	NP-10Z	
3.	Report covering period fromthru				
4.	LOANS MADE OR GUARANTEED BY CANDIDATE  NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN	
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		· .	TO DATE	
14.	(Value, 705)(256, 611, 617)(2, 715)		·		
	DESCRIPTION				
b.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
C.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
d.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION ·				
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			-	
	DESCRIPTION				
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		·		
		·			
	DESCRIPTION				
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Col		8	8	

	/ 1	ER LOANS	C 1.40	SCHEDULE C1
1.	Committee Name <b>Emmule</b>	to Elect Lation	ia (gillelle	2. ID# 12-NP-107
3	Report covering period from	-/a thru	5-31-12	102

4	ALL OTHER LOANS	DATE	AMOUNT	CUMULATIVE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	TOTAL THIS CAMPAIGN TO DATE
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			·
			· · ·	
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#	,		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#	,		
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE. ZIP, AND ID#			
		· 		
	DESCRIPTION			
_				
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	·			
	DESCRIPTION			47
			0	6
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Page, Line 5(a), Column A]	Detailed Summary		

#### **EXPENDITURES FOR OPERATING EXPENSES\***

SCHEDULE **D** 

	1. Committee Name Committee to Elect Latuava Gillette	2. ID# Q-N,	P-102
	3. Report covering period from $1-1-12$ thru $5-21$	-12	
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP  PRINTING PIUS  2069 MCCUIOCH Blud  LHC AZ 86403  DESCRIPTION OF ITEMS OR SERVICES PURCHASED	1-2-12	4,35
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED  Oppies		
b.	NAME, ADDRESS, CITY, STATE AND ZIP PACE 575 ROBIN LANC LHC, AZ 86403 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	2-20-12	50,00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED  Ad Hor EVENT		
C.	NAME, ADDRESS, CITY, STATE AND ZIP  Western Humania Society  1100 Empline DR  LHCAZ  DESCRIPTION OF ITEMS OR SERVICES PURCHASED  ACI O NAME ON Table	3-7-W	100.00
d.	NAME, ADDRESS, CITY, STATE AND ZIP  GOLD STOLD ENGRAVING  34 SCOTT DR  LHC A2 86403  DESCRIPTION OF ITEMS OR SERVICES PURCHASED  Name Bodge	4-16-12	9,25
e.	NAME, ADDRESS, CITY, STATE AND ZIP  PRINTING PIUS  2069 MCQUILOCH Blvd  LHCAZ 86403  DESCRIPTION OF, ITEMS OR SERVICES PURCHASED  BYOCHURS + DeCal For Can	5-27-12	186.41
f.	NAME, ADDRESS, CITY, STATE AND ZIP		

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line

DESCRIPTION OF ITEMS OR SERVICES PURCHASED

9, Column A)

<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

# INDEPENDENT EXPENDITURES\*

IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED  IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION	٠.	1. Committee Name Committee to Elect Latraua Gillette		1P-102
DENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED    DENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED    DENTIFY RECIPIENT OF EXPENDITURE AND ZIP    PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * * Opposed * * CANDIDATE   OPFICE SOUGHT   YEAR OF ELECTION     PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * * Opposed * * CANDIDATE   OPFICE SOUGHT   YEAR OF ELECTION     PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * * Opposed * * CANDIDATE   OPFICE SOUGHT   YEAR OF ELECTION     PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * Opposed * * CANDIDATE   OPFICE SOUGHT   YEAR OF ELECTION     PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * Opposed * * CANDIDATE   OPFICE SOUGHT   YEAR OF ELECTION     PURPOSE AND DESCRIPTION OF PURCHASE   Benefitted * * Opposed * O	:	3. Report covering period from	-12 -	
IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED  IN MAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * * OPPOSED	4	INDEPENDENT EXPENDITURES	EXPENDITURE	OF THE
PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * * CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  Ab. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * * CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  4c. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * * CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 (If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A)  *SEE A.R.S. § 16-901(14)  *SEE A.R.S. § 16-901(14)  *SEE A.R.S. § 16-901(14)  NAME, ADDRESS, CITY, STATE AND ZIP  **SEE A.R.S. § 16-901(14)  **SEE A.R.S. § 16-90		DENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	WOL	
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  By NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitled * * Opposed * Oppo	4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  By NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitled * * Opposed * Oppo				
b. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * * CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  4c. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitied * * Opposed * CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 (If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A)  *SEE A.R.S. § 16-901(14).  Destify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the squest or suggestion of any candidate or any campaign committee or agent of that candidate.  IMAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT	- 1	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •	;	
PURPOSE AND DESCRIPTION OF PURCHASE Benefitted * * * Copposed * *  CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  4c. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted * * * Opposed * *  CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [It last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the squest or suggestion of any candidate or any campaign committee or agent of that candidate.  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT		CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  Ac. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT	4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  Ac. NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT				
PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1	ŀ	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ● ● Opposed ● ●		,
PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [It last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  Ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS  AMOUNT	Γ	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT	4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT	. [			
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT				
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5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [It last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]  *SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the exquest or suggestion of any candidate or any campaign committee or agent of that candidate.  ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT	<b>-</b>			
*SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT  AMOUNT				
certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.  Ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT SIX MONTHS	5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line	10, Column AJ	
ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS  AMOUNT	*SE	E A.R.S. § 16-901(14).		
ignature of Treasurer  NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST  AMOUNT SIX MONTHS	certify	r, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation	, consultation or co	ncert with or at the
NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS  AMOUNT	cques	to suggestion of any candidate of any campaign committee of agent of any candidate		
SIX MONTHS	Signatu	re of Treasurer		
SIX MONTHS	F	A SOUTH AND A SOUT	NAUTHINI THE LACT	AMOUNT
Schedule D-1 Page of		NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTION. SIX MONTHS	WHANK THE LAST	AMOUNT
Schedule D-1 Page of				
Schedule D-1 Page of				
	L		Schedule	D-1 Page of

# LOANS MADE BY REPORTING COMMITTEE SCHEDULE D-2

	1. Committee Name Cammittee to Elect Latinua Gilette 3. Report covering period from 1-1-12 thru 5-31-	2. ID# 12-NP-10 2	
	3. Report covering period from / 1/2 thru & 3/3/-	12	
4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	20, 11, 10, 102	
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
l.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		0

#### **OFFSETS TO OPERATING EXPENSES \***

1. Committee Name Committee to Elect La Timia Callette	2. ID#   \array - \begin{align*}	VP-162
3. Report covering period from $\frac{1-1-1}{2}$ thru $\frac{5-3}{2}$	-/2	
REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	RECEIVED	KEFOND
NAME, ADDRESS, CITY, STATE, AND ZIP		
DESCRIPTION OF REFUND		
NAME, ADDRESS, CITY, STATE, AND ZIP		
DESCRIPTION OF REFUND	·	
NAME, ADDRESS, CITY, STATE, AND ZIP	·	
DESCRIPTION OF REFUND		
NAME, ADDRESS, CITY, STATE, AND ZIP		
DESCRIPTION OF REFUND		
NAME, ADDRESS, CITY, STATE, AND ZIP		
	:	
DESCRIPTION OF REFUND		
NAME, ADDRESS, CITY, STATE, AND ZIP	,	
DESCRIPTION OF REFUND		
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]		4
Includes return of contributions made by reporting committee		. 0
	·	

## REPAYMENT OF CANDIDATE LOANS

Committee Name Committee to Flect Lationa Gillette  Report covering period from 1-1-12 thru 5-	3/~/2	
REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUN OF THE REPAYME
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	·	I AIME
IAME, ADDRESS, CITY, STATE, AND ZIP		
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NAME, ADDRESS, CITY, STATE, AND ZIP		
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NAME, ADDRESS, CITY, STATE, AND ZIP		
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NAME, ADDRESS, CITY, STATE, AND ZIP		1
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		
		10

# REPAYMENT OF ALL OTHER LOANS

1. Committee Name ammittee to Elect	Cationa Gillette 12 NAMOZ
3. Report covering period from	thru 5-31-12

4	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	REPAYMENT	
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE.	WADE	REPAYMENT	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
	·			
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		:	
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
u.	NAME, ADDICES, CITT, STATE, ZIT AND 10#			
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
		,		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]			
٠.	Enter the state of		6	

#### TRANSFERS TO OTHER POLITICAL COMMITTEES

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

	1. Committee Name Committee to Elect Latinua Callettu 12-NP-102  3. Report covering period from 1-1-12 thru 5-31-12		
	3. Report covering period from //// thru 5-	31-12	
4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE)  TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	·		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	•		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	NAME ADDRESS SITE OF ATTENDANCE OF THE ADDRESS OF T		·
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		

ANY OTHER DISBURSEMENT

	1. Committee Name Committee to Elect La Tuava Contrett	2. ID#	NP-102
	3. Report covering period from 1-1-13 thru 5-3	1-12	
			·
·	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT	AMOUNT OF THE
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	MADE	DISBURSEMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
ŀ	DESCRIPTION		
	BESONII TION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	-	
1			
			•
	DESCRIPTION		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
1		·	
ı	DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
٠.			
	DESCRIPTION		
е.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		-
		·	
	DESCRIPTION		,
	DESCRIPTION		1
		<u> </u>	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]		<b>6</b>

# IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE **E** 

	1 -4 14 LC+ CU4-			
	1. Committee Name Committee to Elect Latvava Gillette 2. ID#  3. Report covering period from [-1-12] thru 5-31-12			DP 102
	3. Report covering period from	(2 thru 5-3)	1-12	
4	IN-KIND CONTRIBUTION	NS and EXPENDITURES	DATE	FAIR MARKET VALUE
		(OR NAME, ADDRESS AND ID# OF THE OM RECEIVED OR TO WHOM GIVEN		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION * *  EXPENDITURE * *		
	DESCRIPTION			
	OCCUPATION	EMPLOYER	·	
þ.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYÉR		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •  EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]			
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PA Line 11, Column-A]	GE OF SCHEDULE E [If last page of Schedule E, transfer total to D	etailed Summary Page	6

# **DIVIDENDS, INTEREST, AND OTHER RECEIPTS**

SCHEDULE F-1

1. Committee Name Committee	to Heat Lationa G	Nette 12-NP-102
3. Report covering period from	ンノス thru `	5-3/-12

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		AMOUNT OF THE
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	RECEIVED	RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT	٢	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		-
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		,
	DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A		6

Page of

	1. Committee Name Cammittee to Elect Lastyava Cellette	2. ID#  Q-/V	P-102
	3. Report covering period from /-/-/2 thru 5-3/-	-12	
-	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	MADE	REFUND
١.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
·	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
i.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
		·	
	DESCRIPTION OF REFUND		
	ANALE ADDRESS OF A PLATE TID AND IDA	I	1

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]

\* Includes return of contributions received by reporting committee

DESCRIPTION OF REFUND

DESCRIPTION OF REFUND

NAME, ADDRESS, CITY, STATE, ZIP AND ID#

# **DEBTS AND OBLIGATIONS (Excluding Loans)**

	1. Committee Name Ammittee to 1	Hectla.	Kana GI	lette	2. ID# 12NP102
	3. Report covering period from	<i>≩</i>		31-12	
4	DEBTS AND OBLIGATIONS  NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			·	
	DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLC F-3 [Transfer total to Detail Summary Page Line 19, Col		ONLY IF LAST PAGE O	F SCHEDULE	0